



**InsureKidsNow.gov**  
Connecting Kids to Coverage

## Summary of Benefits for Pennsylvania, MEDICAID

### Children's Dental Services

#### Preventive Services

	Is the service Covered?			Frequency	List any service-specific limitations
	Yes	Only with prior authorization	No		
<b>Cleanings</b>	X			1 x 6 months	
<b>Fluoride treatments (including fluoride varnishes)</b>	X			1 x 6 months	
<b>Sealants (list any tooth-specific limits)</b>	X			1 x every 3 years	On 1st and 2nd permanent molars when eruption allows
<b>Space maintainers</b>	X			1 x every 5 years	Placed when premature loss of primary molars occurs



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### Diagnostic Services

	Is the service Covered?			Frequency	List any service-specific limitations	Recommended age of first visit?
	Yes	Only with prior authorization	No			
<b>Dental examinations</b>						
	X			1 x 6 months	Recommended age of first visit: Upon eruption of 1st tooth	
<b>X-Rays</b>						
Bitewing	X			2 x year		
Full Mouth	X			1 x every 3 years		
Panoramic	X			1 x every 3 years		



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### Treatment Services

	Is the service Covered?			Frequency	List any service-specific limitations	Criteria for coverage
	Yes	Only with prior authorization	No			
Fillings						
Silver amalgam	X				None	
Tooth colored composite	X				None	
Crowns/tooth caps						
Stainless steel crowns		X			One per 5 years per tooth	
Metal (only) crowns		X			One per 5 years per tooth	
Metal/porcelain crowns		X			One per 5 years per tooth	
Porcelain (only) crowns		X			One per 5 years per tooth	
Root Canals (endodontics)						
Root canals on baby teeth (pulpotomies)		X			Must be considered dentally necessary	
Root canals on permanent teeth		X			One per tooth per 2 years	
Gum (periodontal) therapy						
	X				Four treatments per 12 month period	



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	Yes	Only with prior authorization	No			
<b>Dentures</b>						
Partial dentures		X			One in 5 years	
Complete dentures		X			One in 5 years	
Bridges		X			One in 5 years	
<b>Orthodontics*</b>						
Retainers (orthodontic)		X				
Braces		X			Medically necessary	
<b>Oral surgery</b>						
Simple extractions		X				
Surgical extractions		X			Impacted teeth are covered under the medical portion of CHIP	
Care of abscesses		X				
Cleft palate treatment		X			May be covered under the medical portion of CHIP depending on the type of service rendered	
Cancer treatment		X			May be covered under the medical portion of ChIP depending on the type of service rendered	



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	Yes	Only with prior authorization	No			
Treatment of fractures		X			May be covered under the medical portion of CHIP depending on the type of service rendered	
Biopsies		X				
<b>Treatment of jaw joint problems (TMJ)</b>						
			X			
<b>Emergency room services provided by a dentist</b>						
	X				Treatment and diagnostic tests provided must be considered medically necessary. May be covered under the medical portion of CHIP depending on the type of service rendered and the type of injury sustained.	
<b>Inpatient Hospital Services</b>						
		X			Covered under the medical portion of CHIP if considered dentally necessary.	
<b>Anesthesia</b>						
General anesthesia		X			May be covered under the medical portion of CHIP	
Intravenous conscious sedation		X			May be covered under the medical portion of CHIP	



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	Yes	Only with prior authorization	No			
Non-intravenous conscious sedation		X			May be covered under the medical portion of CHIP	
Analgesia (nitrous oxide)		X			May be covered under the medical portion of CHIP	

\* When this information is posted on the Insure Kids Now website, we will include a special note for orthodontic services explaining that parents and caretakers should work with their child's orthodontist to ensure that the treatment and payment terms and conditions are clear at the outset of treatment (for example, what happens in the case of a child who becomes ineligible for Medicaid or CHIP while he or she is undergoing orthodontic treatment?).